MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)

SERIAL NO. 10/567575 APPLICANT(S)

FILING DATE

AFTER 1 MAMENDMENT

DEP.

IND.

5	<u> </u>	CLAIMS														
			AS FILED		AFTER		AFTER		CLAIN	710				-	-	
	·		IND.	DEP.		ADMENT	3 MAMENDMENT				AS I	AS FILED		TER	T	
7	1			DEP.	IND.	DEP.	IND.	DEP.			IND.	DEP.	IND,	NDMENT	4.	
]	<u>2</u> 3							ļ		51			4110.	DEP.	- -	
	4			 						52 53					+	
	5									54					1	
	<u>6</u> 7	-						· · · · · ·		55					╀	
5	8								i	<u>56</u> 57		.,			1	
3	9	$-\Gamma$								58					L	
7. ∤	10 11									59 60	-				-	
Ţ	12			7						61	1		i			
1	13 14	- -								62				-	-	
Ė	15									63 64 -	 				┢	
	16									65						
ŀ	17 18	- -							ŀ	66					-	
	19			-4					· <u>t</u>	68	 -				_	
-	20 21	- -		7					-	69 70					<u>. </u>	
	22	_		, 					ŀ	71						
-	23			17						72						
-	24. 25	╁		-/-						73 74						
F	26	1								75					<u> </u>	
-	27 28	┧—	/	-,-					 	76 77						
	29	1		171						78						
\vdash	30 31	╢		1					ŀ	79 80						
	32				<u> </u> -					81						
	33 34	-							-	82 83	-					
	35·	1-							-	84					_	
-	36					-				85						
	37 38	┤	-						-	86)				
	39 .							-		88					-	
	40 41	-								89 90	·					
	42	 	-							91						
	43									92						
	44 45									93 94						
4	16									95				- -		
	17 18									96				- -		
	9			,						9.7 9.8						
	0					- -				99				 		
TOTA	L IND.	6	,	8	J		<u>`</u>		-	00						
TOTA	L DEP.	21		<u> </u>		 	·		TOT	AL IND.		} <u> </u>	1	4		
TO	TAL IMS	3			42		1500	1000	ļ	L DEP	4		₹ 8			
	-	<u> </u>		408		料等				TAL AIMS	變		1		*****	
PTO-1360 (REV. 11/04) U.S. DEPARTMENT											of CONINE	NOTE:	·			

1